PATENT APPLICATION FEE DETERMINATION RECORD

Effective November 10, 1998

Application or I	Docket	Number
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9-46900

_	CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY			THAN	
FOR					(Column 2) NUMBER EXTRA			١,	TYPE		OR	SMALL	
			NUMBL	R FILED		NUNDER	EXTRA		RATE	FEE		RATE	FEE
BASIC FEE									380.00	OR		760.00	
TOTAL CLAIMS 25 minus 20			20=	* S			X\$ 9=		OR	X\$18=	90		
	DEPENDENT CL			minus	3 =	<u> </u>			X39=		OR	X78=	234
MU	JLTIPLE DEPEN	IDENT C	LAIM PH	ESENT		· · · · · · · · · · · · · · · · · · ·			+130=		OR	+260=	
* If the difference in column 1 is less than zero, enter "0" in column 2							ــ ار	TOTAL		OR	TOTAL	1084	
	C	LAIMS	AS AI	MENDED) - P	ART II	1	214	<i>.</i>		,	OTHER	
		(Colur				olumn 2)	(Column 3)	٠ ـــ	SMALL		OR	SMALLE	ENTITY
AMENDMENT A		CLAI REMAI AFT AMEND	INING ER		PR	HIGHEST NUMBER EVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*		Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent FIRST PRESE	*		Minus	***	THE CLAIM	=		X39=		OR	X78=	
_	FIRST FIRESE	NIAIIC.	TOP N.C.	LIIFEE DE.	ENU	EN I OLDINI			+130=		OR	+260=	
								-	TOTAL DDIT. FEE			TOTAL ADDIT. FEE	
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		(Colur	nn 1)		(C	olumn 2)	(Column 3)	А	DDII. FEE [• '	ADDII. FEEL	
<u>,</u>		(Colur	IMS		F	olumn 2)	(Column 3)	^ Г	DDII. FEE	∆DDI-	·		∆DDI-
ENT B			IMS INING ER		PR		(Column 3) PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDMENT B	Total	CLAI REMAI AFT AMEND	IMS INING TER DMENT	Minus	PR	HIGHEST NUMBER EVIOUSLY	PRESENT EXTRA			TIONAL	OR		TIONAL
AMENDMENT B	Independent	CLAI REMAI AFT AMEND	IMS INING ER DMENT	Minus	PR PR **	HIGHEST NUMBER EVIOUSLY PAID FOR	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL
AMENDMENT B		CLAI REMAI AFT AMEND	IMS INING ER DMENT	Minus	PR PR **	HIGHEST NUMBER EVIOUSLY PAID FOR	PRESENT EXTRA	^ - -	RATE X\$ 9=	TIONAL FEE	OR	RATE X\$18=	TIONAL
AMENDMENT B	Independent	CLAI REMAI AFT AMEND	IMS INING ER DMENT	Minus	PR PR **	HIGHEST NUMBER EVIOUSLY PAID FOR	PRESENT EXTRA		RATE X\$ 9= X39= +130= TOTAL	TIONAL FEE	OR OR	RATE X\$18= X78= +260= TOTAL	TIONAL
AMENDMENT B	Independent	CLAI REMAI AFT AMEND * *	IMS INING TER DMENT I	Minus	PR P	HIGHEST NUMBER EVIOUSLY PAID FOR ENT CLAIM	PRESENT EXTRA		RATE X\$ 9= X39= +130=	TIONAL FEE	OR OR	RATE X\$18= X78= +260=	TIONAL
	Independent	CLAI REMAI AFT AMEND * * * * * * * * * * * * * * * * * * *	IMS INING TER DMENT IN OF MUI	Minus	PEND	HIGHEST NUMBER EVIOUSLY PAID FOR ENT CLAIM	PRESENT EXTRA = = (Column 3)		RATE X\$ 9= X39= +130= TOTAL	TIONAL FEE	OR OR	RATE X\$18= X78= +260= TOTAL	TIONAL FEE
ပ	Independent	CLAI REMAI AFT. AMEND * * * * * * * * * * * * (Column	IMS INING TER DMENT IN OF MUI MN OF MUI MNS INING TER	Minus	PENDI	HIGHEST NUMBER EVIOUSLY PAID FOR ENT CLAIM	PRESENT EXTRA		X\$ 9= X39= +130= TOTAL DDIT. FEE	TIONAL FEE	OR OR	RATE X\$18= X78= +260= TOTAL	TIONAL
ပ	Independent FIRST PRESE Total	CLAI REMAI AFT AMEND * * * (Colum CLAI REMAI AFTI	MS INING TER DMENT INING TER INING T	Minus LTIPLE DEF	PENDI	IGHEST NUMBER EVIOUSLY PAID FOR ENT CLAIM Olumn 2) HIGHEST HUMBER EVIOUSLY	PRESENT EXTRA = = (Column 3) PRESENT		X\$ 9= X39= +130= TOTAL DDIT. FEE	ADDI- TIONAL FEE	OR OR	X\$18= X78= +260= TOTAL ADDIT. FEE	ADDI- TIONAL
AMENDMENT C	Independent FIRST PRESE Total Total	CLAI REMAI AFT AMEND * * * COlun CLAI REMAI AFTI AMEND *	MMS INING TER DMENT N OF MUI	Minus ILTIPLE DEF Minus Minus	PENDO (CG) H N PRI PRI PRI ***	Olumn 2) HIGHEST NUMBER EVIOUSLY PAID FOR OIUMN 2) HIGHEST HUMBER EVIOUSLY PAID FOR	PRESENT EXTRA = (Column 3) PRESENT EXTRA = =		RATE X\$ 9= X39= +130= TOTAL DDIT. FEE	ADDI- TIONAL FEE	OR OR OR	RATE X\$18= X78= +260= TOTAL ADDIT FEE	ADDI- TIONAL
AMENDMENT C	Independent FIRST PRESE Total	CLAI REMAI AFT AMEND * * * COlun CLAI REMAI AFTI AMEND *	MMS INING TER DMENT N OF MUI	Minus ILTIPLE DEF Minus Minus	PENDI (CC) H N PRI PRI PRI ***	Olumn 2) HIGHEST NUMBER EVIOUSLY PAID FOR OIUMN 2) HIGHEST HUMBER EVIOUSLY PAID FOR	PRESENT EXTRA = (Column 3) PRESENT EXTRA = =	A	X\$ 9= X39= +130= TOTAL DDIT. FEE RATE X\$ 9= X39=	ADDI- TIONAL FEE	OR OR OR	RATE X\$18= X78= +260= TOTAL ADDIT FEE RATE X\$18= X78=	ADDI- TIONAL
AMENDMENT C	Independent FIRST PRESE Total Total	CLAI REMAI AFT AMEND * * * * * * * * * * * * * * * * * *	MMS INING TER DMENT N OF MUI	Minus ILTIPLE DEP Minus Minus LTIPLE DEP	PENDI PENDI PENDI PRI PRI PENDI	Olumn 2) HIGHEST NUMBER EVIOUSLY PAID FOR ENT CLAIM OIUMN 2) HIGHEST HUMBER EVIOUSLY AID FOR	PRESENT EXTRA = (Column 3) PRESENT EXTRA = =	A	X\$ 9= X39= +130= TOTAL DDIT. FEE RATE X\$ 9=	ADDI- TIONAL FEE	OR OR OR	RATE X\$18= X78= +260= TOTAL ADDIT. FEE RATE X\$18=	ADDI- TIONAL